













## 2021 Benefit Guide






# Jade







All Essentials Covered

OVERALL ANNUAL BENEFIT (OVERALL ANNUAL LIMIT)		N\$705 000 per Beneficiary N\$1 090 000 per Family	
CATEGORY A: Benefits For Major Medical Expenses		% NAMAF Tariff	Pre-authorisation: 100% of tariff will be paid out. Without Pre-authorisation: No benefit will be paid out except in the case of emergency hospital admissions and emergencies after-hours, weekends and public holidays. <b>OVERALL LIMIT</b>
Additional Hospital Benefit Cover: GPs and Specialists In-Hospital services are paid up to a maximum of 225% of NAMAF Tariff. <b>OVERALL LIMIT</b>			
		COVER	
	<b>1. Hospitalisation</b>	100%	Overall Annual Limit
	1.1. Accommodation and Theatre		
	1.2. Intensive and high care (Maximum 3 days, then motivation)		
	1.3. Blood transfusions		
	1.4. Radiology & Pathology (in-hospital) - Additional Hospital Benefit Cover excluded		
	1.5. Physiotherapy & Biokinetics - Additional Hospital Benefit Cover excluded		
	1.5.1. Physiotherapy & Biokinetics (in-hospital)		
	1.5.2. Physiotherapy & Biokinetics (post rehabilitation) - Additional benefit once the patient is out of hospital - <b>9 sessions/visits per Beneficiary (Benefit available within 3 months from hospital discharge)</b> (Subject to prior approval)		
	1.6. Medicine, fixed tariff procedures, hospital apparatus and to take out medicine (7 days supply only)		
	1.7. Dialysis (Subject to Case Management and MHC guidelines)		
1.8. Organ Transplant (Subject to Case Management and MHC guidelines) - Including medical expenses incurred by the donor if the recipient is a Fund member	100% of Cost		
1.9. Internal Appliances & Materials (As per NMC protocol)	100% of Cost		
	<b>2. General Practitioners and Specialists (in-hospital services)</b> - Additional Hospital Benefit Cover included	225%	Overall Annual Limit



	<b>3. Specialised Radiology Procedures (in &amp; out of hospital)</b> Additional Hospital Benefit Cover excluded - Referral from a medical specialist only (referral from GP acceptable in places where there is no medical specialist) (Subject to prior approval)	100%	Overall Annual Limit
	3.1. MRI & CT Scans		N\$20 000 per Family
	3.2. Nuclear Medicine		Overall Annual Limit
	<b>4. Maternity</b> (Groups have cover from date of joining. Individuals have a 12-month waiting period)		Overall Annual Limit
	4.1. Confinement – full procedure		
	4.2. Antenatal Consultation <b>12 consultations per Beneficiary (Pro-rated from date of joining)</b> - Additional Hospital Benefit cover excluded		
	4.3. Ante / Postnatal Classes & Education <b>6 sessions per Beneficiary (Pro-rated from date of joining)</b> - Additional Hospital Benefit cover excluded	100%	Payable from Maternity Benefit
	4.4. Sonar Scans (excluding 3D) <b>3 scans per Beneficiary per Pregnancy</b> - Additional Hospital Benefit cover excluded		
	4.5. Tests for Chromosomal and Foetal Abnormalities - Additional Hospital Benefit cover excluded		
	4.6. Midwifery Service - Additional Hospital Benefit cover excluded		
	<b>5. Insertion of Intrauterine Device w/ Hormone (Mirena)</b> (all-inclusive) (Subject to prior approval)	100%	N\$6 250 per Beneficiary
	<b>6. Oncology (all-inclusive in and out of hospital)</b> (Subject to Case Management and MHC guidelines)		
	6.1. Consultations and procedures		
	6.2. Hospitalisation	100%	N\$450 000 per Beneficiary
	6.3. Radiation oncology (Referral from a medical specialist only)		
	6.4. Oncology medication (chemotherapy, radiotherapy and hormone therapy)		
	<b>7. Refractive Surgery – All-inclusive</b> (Subject to prior approval and MHC guidelines) Groups have cover from date of joining Individuals have one year waiting period	100%	N\$5 950 per Beneficiary once off N\$7 050 per Family
	<b>8. Reconstructive Surgery (medical necessity only)</b> (Subject to prior approval and subject to strict MHC guidelines)	100%	No Benefit
	<b>9. Private Nursing/ Frail Care / Hospice</b> (Subject to Case Management)	100%	N\$10 500 per Family
	<b>10. Psychiatric Treatment – Hospitalisation</b> (Subject to prior approval)		
	10.1. Alcoholism / Drug Addiction (Subject to prior approval and MHC guidelines)	100%	N\$31 500 per Family
	<b>11. Specialised Dental Surgery</b> - Additional Hospital Benefit cover excluded <b>(Subject to Pre-Authorisation)</b>		
	11.1. Maxillo-Facial & Oral Surgery - Hospitalisation (trauma/non-elective)		N\$57 000 per Family
	11.2. Maxillo-Facial & Oral Surgery - Hospitalisation (other/elective)	100%	N\$6 850 per Beneficiary N\$10 900 per Family
	11.3. Dental Implant – hospitalisation		No Benefit
	11.4. Maxillo-Facial & Oral Surgery – internal prosthesis (Excluding dental implant component)		Payable from Internal appliances under Hospital Benefit
	<b>12. Stomal Therapy (all-inclusive)</b> (Subject to prior approval)	100%	N\$22 100 per Family

	<b>13. Ambulance &amp; Evacuation Services</b>		Overall Annual Limit
	13.1. Emergency Ambulance & Flights (Territory: SADC countries) (Subject to prior approval)	100%	Unlimited Benefit
	13.2. Ambulance/Inter-Hospital Transfer (Subject to prior approval)		N\$4 250 per Family
	<b>14. Medical Referral</b> Subject to accommodation and travelling reimbursement protocols (Subject to prior approval)		Overall Annual Limit
	14.1. Transport	80% of Cost	N\$9 800 per Family
	14.2. Accommodation Other than a Recognised Hospital/Medical Institution (Maximum of 2 days)	100%	N\$600 per day per Family
	<b>15. International Medical Travel Insurance</b> - Medical cover when travelling to foreign countries - For emergency cases only (not for elective surgery or procedure)	100% of Cost	N\$10 000 000 per incident
	<b>16. Specified Illness Conditions</b> As per National Guidelines (Sub-limits are pro-rated from date of joining)		N\$41 000 per Family N\$24 150 per Beneficiary
	16.1. HIV/AIDS (As per national guidelines for antiretroviral therapy)	100%	Payable from Specified Illness Conditions
16.1.1. Medicine (Paid at maximum Namibia medicine price list on generics)			
16.1.2. First Full HIV Consultation / Assessment <b>Once off benefit</b>	N\$460		
	16.1.3. Consultation (after the first full HIV consultation/assessment) <b>6 consultations per Beneficiary</b>	N\$420	
	16.1.4. HIV Counselling (Payable from Specified Illness Conditions)		N\$1 250 per Beneficiary
	16.1.5. Pathology Tests (Payable from Specified Illness Conditions)	100%	N\$5 450 per Beneficiary
	16.1.6. HIV Resistance Test (Subject to prior approval)		Payable from Specified Illness Conditions
	16.2. Prevention of Mother-to-Child Transmission (PMTCT)		
	16.3. Post-Exposure Prophylaxis (PEP)	100%	
	16.4. Pre-Exposure Prophylaxis (PrEP)		
<b>CATEGORY B: DAY-TO-DAY BENEFIT</b>		<b>100% Tariff</b>	<b>Sub-limits are pro-rated from date of joining except the optical benefit. OVERALL ANNUAL LIMIT</b>
	<b>17. General Practitioners &amp; Specialists (out-of-hospital including casualties)</b>		N\$6 000 per Beneficiary N\$10 400 per Family
	17.1. Consultations/Visits		Payable from General Practitioners and Specialists Benefit
	17.2. Procedures/Services (out-of-hospital, including casualties)		
	17.3. Materials and Disposable Items (Out-of-Hospital)	100%	
	17.4. Radiology & Pathology (Out-of-hospital, including radiography, sonography, medical laboratory technology and chemical biochemistry) (Referral from a Medical Practitioner)		
	Benefit Booster applicable (Additional benefit once limit is exceeded)		
	<b>18. Medicine &amp; Injections</b>		N\$14 100 per Family
	18.1. Medicine & Injections (Acute and Chronic) (Paid at maximum Namibia medicine price list on generics)		N\$7 200 per Beneficiary
	18.2. Essential Vaccination / Immunisation (Paid at maximum Namibia medicine price list on generics)	100%	Payable from Medicine & Injections
	18.3. Self Medication (Paid at maximum Namibia medicine price list on generics)		N\$935 per Family N\$145 per claim per Beneficiary

	<b>19. Primary Health Care Services</b>		N\$300 per Beneficiary N\$1 000 per Family
	19.1. Consultations and Procedures	100%	Payable from Primary Health Care Services
	19.2. Medicine & Injections (Paid at maximum Namibia medicine price list on generics)		Payable from Medicine (Acute & Chronic)
	Benefit Booster applicable (Additional benefit once limit is exceeded)		
	<b>20. Dentistry</b>		
	20.1. Conservative & specialised dentistry (including dental therapy) Benefit Booster applicable (Additional benefit once limit is exceeded)	100%	N\$7 600 per Family
	20.2. Dental Implants (in-hospital & in-practice) (Pre-authorisation required)		No Benefit
	20.3. Orthodontics (Prior approval required)		N\$8 800 per Beneficiary once-off
	<b>21. Optical</b> Every 2 years (Including frame) (2021-2022)		N\$4 200 per Family
	21.1. Eye Tests, Spectacles & Contact Lenses	100%	N\$2 340 per Beneficiary every 2 years
	21.2. Frame		N\$1 040 per Beneficiary
	<b>22. Auxiliary Services (Supplementary Services)</b>		N\$5 650 per Family
	22.1. Consultation & procedure	100%	Payable from Auxiliary Services
	22.2. Medicine		Payable from Medicine (Acute & Chronic)
	Benefit Booster applicable (Additional benefit once limit is exceeded)		
	<b>23. External Appliances</b> (Subject to MHC guidelines)	80% of Cost	N\$ 2 600 per Family
	<b>24. Wheelchair, Artificial Limbs, Artificial Eyes, Hearing Aid Apparatus, Devices for Diabetes Management</b>		No Benefit
	<b>25. Benefit Booster</b> Applicable if medicine & injections, dentistry, GPs' & Specialists, primary health care & auxiliary services benefits are depleted		N\$2 900 per Family
	25.1. Medicine & Injections (Acute & Chronic) - Excluding self-medication	70%	Payable from Benefit Booster
	25.2. Dentistry	70%	
	25.3. General Practitioners & Specialists (Consultations/visits & procedures/services out-of-hospital, including casualties)	80%	
	25.4. Primary Health Care	80%	
	25.5. Auxiliary Services	70%	

## Contribution Tables

Jade Individual Contributions				
Age Band		Main	Adult	Child
0	25	1,720	1,143	510
26	30	1,915	1,293	510
31	35	2,109	1,446	510
36	40	2,378	1,651	510
41	45	2,610	1,836	510
46	50	2,820	1,996	542
51	55	3,085	2,202	542
56	60	3,299	2,366	542
61	65	3,525	2,543	542
66+		3,745	2,716	542

Jade Group Contributions				
Age Band		Main	Adult	Child
0	25	1,555	1,015	449
26	30	1,721	1,134	449
31	35	1,840	1,240	449
36	40	2,010	1,371	449
41	45	2,215	1,535	449
46	50	2,359	1,644	458
51	55	2,546	1,799	458
56	60	2,727	1,934	458
61	65	2,891	2,064	458
66+		2,905	2,078	458